

February 21, 2001

Ms. Grisell V. Diaz-Cotto
Emergency and Remedial Response Division
United States Environmental Protection Agency
Region III
290 Broadway, 19th Floor
New York, NY 10007-1866

Re: January 2001 Discharge Monitoring Report
Leachate Treatment Plant, Operable Unit 1
Kin-Buc Landfill Superfund Site

Dear Ms. Diaz-Cotto:

The January 2001 Discharge Monitoring Report (DMR) for the Leachate Treatment Plant of Operable Unit 1, Kin-Buc Landfill Superfund Site, prepared by U.S. Filter Operating Services is attached. We will provide copies of the DMR to Ian Curtis and Susan Dietrick at the NJDEP.

Should you have any questions concerning the DMR or other site items, please contact me or Glenn Grieb at the Kin-Buc site.

Very truly yours,
USFilter Operating Services
On behalf of SCA Services, Inc.,



Dennis J. Duryea, P.E.
Area Manager

DJD\plb

Enclosure

cc: Ian Curtis - NJDEP
Susan Dietrick - NJDEP
Stephen Joyce - SCA
Carl Januszkiewicz - Waste Management
Glenn Grieb - USFOS, Kin-Buc
File



NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WATER QUALITY

MONITORING REPORT - TRANSMITTAL SHEET

NJPDES NO.

*						
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*NJ Permit Equivalent

REPORTING PERIOD

M	o.	Y	r.
0	1	0	1

M	o.	Y	r.
0	1	0	1

PERMITTEE: Name: SCA Services, Inc.
Address: 383 Meadow Road
Edison, New Jersey 08817

FACILITY: Name: Kin-Buc Landfill
Address: 383 Meadow Road
Edison, New Jersey 08817
Telephone: 732-572-4743

FORMS ATTACHED (Indicate Quantity of Each)

Operating Exceptions

SLUDGE REPORT-SANITARY
☐ T-VWX-007 ☐ T-VWX-008 ☐ T-VWX-009
☐ EPA Form 3320-1

SLUDGE REPORT-INDUSTRIAL
☐ T-VWX-010A ☐ T-VWX-010B

WASTEWATER REPORTS
☐ T-VWX-011 ☐ T-VWX-012 ☐ T-VWX-013

GROUNDWATER REPORTS
☐ T-VWX-015(A,B) ☐ T-VWX-016 ☐ T-VWX-017
☐ ELECTRONIC SUBMISSION

	YES	NO
DYE TESTING	<input type="checkbox"/>	<input checked="" type="checkbox"/>
TEMPORARY BYPASSING	<input type="checkbox"/>	<input checked="" type="checkbox"/>
DISINFECTION INTERRUPTION	<input type="checkbox"/>	<input checked="" type="checkbox"/>
MONITORING MALFUNCTIONS	<input type="checkbox"/>	<input checked="" type="checkbox"/>
UNITS OF OPERATION	<input type="checkbox"/>	<input checked="" type="checkbox"/>
OTHER	<input type="checkbox"/>	<input checked="" type="checkbox"/>

NPDES DISCHARGE MONITORING
☒ EPA Form 3320-1

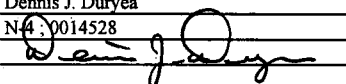
(Detail any "Yes" on reverse side in appropriate space.)

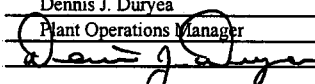
NOTE: The "Hours Attended at Plant" on the reverse of this sheet must also be completed.

AUTHENTICATION I certify under penalty of law that this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assure my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

LICENSED OPERATOR

**PRINCIPAL EXECUTIVE OFFICER OR
DULY AUTHORIZED REPRESENTATIVE**

Name (Printed) Dennis J. Duryea
 Grade & Registry No. N4:0014528
 Signature 

Name (Printed) Dennis J. Duryea
 Title (Printed) Plant Operations Manager
 Signature 

Date February 21, 2001

[illegible]

MONTH

0	1
---	---

 YEAR

0	1
---	---

Others

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
0	8	8	8	8	0	0	8	8	8	8	8	0	0	8	8
4	18	16	16	16	0	8	19	8	11	9	8	0	0	18	16
17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
8	8	8	0	0	8	8	8	9	7	0	0	8	8	8	
16	16	16	0	4	18	17	10	18	16	0	4	16	16	16	

PERMITTEE NAME/ADDRESS

NAME

ADDRESS

FACILITY
LOCATION

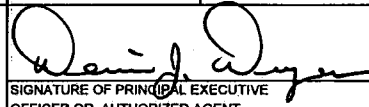
ATTN:

SCA SERVICES, INC.
383 MEADOW ROAD
EDISON, NEW JERSEY 08817

KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT			001			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
01	01	01		01	01	31

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.020402	0.027499	MGD	*****	*****	*****	***		continuous	flow meter
	PERMIT REQUIREMENT	REPORT	ONLY		*****	*****	*****			continuous	flow meter
pH	SAMPLE MEASUREMENT			***	7.63		7.95	S.U.	0	1/week	grab
	PERMIT REQUIREMENT	*****	*****		6.0	*****	9.0			weekly	grab
PETROLEUM HYDROCARBONS	SAMPLE MEASUREMENT			***	*****	0.8	1.4	mg/l	0	2/month	grab
	PERMIT REQUIREMENT	*****	*****		*****	10	15			2/month	grab
COD	SAMPLE MEASUREMENT	12.01	12.68	kg/day	*****	140	169	mg/l		2/month	comp.
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT	ONLY			2/month	comp.
BOD - 5	SAMPLE MEASUREMENT			***		<2.00	<2.00	mg/l	0	2/month	calc.
	PERMIT REQUIREMENT	*****	*****		*****	56	220			2/month	calc.
TOTAL SUSPENDED SOLIDS	SAMPLE MEASUREMENT	<0.0881	<0.1031	kg/day	*****	<1.00	<1.00	mg/l	0	1/week	comp.
	PERMIT REQUIREMENT	REPORT	ONLY		*****	30	45(1)			weekly	comp.
DISSOLVED OXYGEN	SAMPLE MEASUREMENT			***	9.0		15.9	mg/l	0	1/week	grab
	PERMIT REQUIREMENT	*****	*****		INSTANT	*****	*****			weekly	grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
Dennis J. Duryea, P.E. Area Manager								732 572-4743		01/02/21	
TYPED OR PRINTED						AREA CODE		NUMBER		YEAR MO DAY	
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS		(REFERENCE ALL ATTACHMENTS HERE)									

PERMITTEE NAME/ADDRESS

NAME
ADDRESS

FACILITY
LOCATION
ATTN:

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383 MEADOW ROAD
EDISON, NEW JERSEY 08817

KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT			001			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
01	01	01		01	01	31

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BENZENE	SAMPLE MEASUREMENT	<0.00020	<0.00023	kg/day	*****	<2.3	<2.3	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.009	0.02		*****	57	134				
CHLOROBENZENE	SAMPLE MEASUREMENT	<0.00024	<0.00031	kg/day	*****	<2.8	<2.8	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.022	0.058		*****	142	380				
1,1 DICHLOROETHENE	SAMPLE MEASUREMENT	<0.00024	<0.00028	kg/day	*****	<2.8	<2.8	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.003	0.009		*****	22	59				
ETHYLBENZENE	SAMPLE MEASUREMENT	<0.00024	<0.00028	kg/day	*****	<2.8	<2.8	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.022	0.058		*****	142	380				
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT	<0.00027	<0.00031	kg/day	*****	<3.1	<3.1	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.008	0.025		*****	52	164				
TOLUENE	SAMPLE MEASUREMENT	<0.00038	<0.00045	kg/day	*****	<4.4	<4.4	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.004	0.011		*****	28	74				
1,2-TRANSDICHLOROETHYLENE	SAMPLE MEASUREMENT	<0.00021	<0.00025	kg/day	*****	<2.5	<2.5	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.004	0.009		*****	25	60				
NAME/TITLE: PRINCIPAL EXECUTIVE OFFICER		<small>I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 32 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)</small>					TELEPHONE		DATE		
Dennis J. Duryea, P.E. Area Manager							732 572-4743		01 02 21		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR	MO	DAY
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS		(REFERENCE ALL ATTACHMENTS HERE)									

PERMITTEE NAME/ADDRESS

NAME
ADDRESSSCA SERVICES, INC.
383 MEADOW ROAD
EDISON, NEW JERSEY 08817FACILITY
LOCATION
ATTN:KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZNATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT			001			
PERMIT NUMBER			DISCHARGE NUMBER			
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YEAR	MO	DAY	TO	YEAR	MO	DAY
01	01	01		01	01	31

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TRICHLOROETHYLENE	SAMPLE MEASUREMENT	<0.00020	<0.00024	kg/day	*****	<2.4	<2.4	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.004	0.010		*****	26	69			2/month	grab
VINYL CHLORIDE	SAMPLE MEASUREMENT	<0.00039	<0.00044	kg/day	*****	<4.3	<4.3	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	0.008	0.016		*****	52.8	106			weekly	grab
ACENAPHTHYLENE	SAMPLE MEASUREMENT	<0.00007	<0.00008	kg/day	*****	<0.94	<0.94	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
BENZO(A)ANTHRACENE	SAMPLE MEASUREMENT	<0.000070	<0.000076	kg/day	*****	<0.89	<0.89	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
BENZO(A)PYRENE	SAMPLE MEASUREMENT	<0.000038	<0.000041	kg/day	*****	<0.48	<0.48	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
BENZO(ghi)PERYLENE	SAMPLE MEASUREMENT	<0.000042	<0.000046	kg/day	*****	<0.54	<0.54	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
BENZO(k)FLUORANTHENE	SAMPLE MEASUREMENT	<0.000072	<0.000079	kg/day	*****	<0.92	<0.92	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
NAME/TITLE: PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)					TELEPHONE		DATE		
Dennis J. Duryea, P.E. Area Manager							732 572-4743		01/02/21		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR	MO	DAY

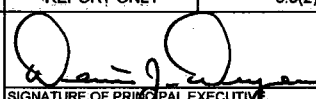
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PERMITTEE NAME/ADDRESS

NAME
ADDRESSSCA SERVICES, INC.
383 MEADOW ROAD
EDISON, NEW JERSEY 08817FACILITY
LOCATION
ATTN:KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZNATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT			001			
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YEAR	MO	DAY	TO	YEAR	MO	DAY
01	01	01		01	01	31

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
IDENO(1,2,3cd) PYRENE	SAMPLE MEASUREMENT	<0.000046	<0.000050	kg/day	*****	<0.59	<0.59	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
PHENANTHRENE	SAMPLE MEASUREMENT	<0.000051	<0.000058	kg/day	*****	<0.57	<0.57	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	5.4(2)			weekly	grab
ALDRIN	SAMPLE MEASUREMENT	<0.000039	<0.000042	kg/day	*****	<0.050	<0.050	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.000133	0.00026		*****	0.0875	0.176			monthly	grab
4,4-DDT	SAMPLE MEASUREMENT	<0.000090	<0.000010	kg/day	*****	<0.1	<0.1	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	0.0000578	0.000146		*****	0.38	0.765			weekly	grab
PCB-1242	SAMPLE MEASUREMENT	<0.000027	<0.000030	kg/day	*****	<0.3	<0.3	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab
PCB-1248	SAMPLE MEASUREMENT	<0.000027	<0.000030	kg/day	*****	<0.3	<0.3	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab
PCB-1254	SAMPLE MEASUREMENT	<0.000027	<0.000030	kg/day	*****	<0.3	<0.3	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)						TELEPHONE		DATE	
Dennis J. Duryea, P.E. Area Manager								732 572-4743		01 02 21	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS		(REFERENCE ALL ATTACHMENTS HERE)									

PERMITTEE NAME/ADDRESS

NAME SCA SERVICES, INC.
 ADDRESS 383 MEADOW ROAD
 EDISON, NEW JERSEY 08817

FACILITY
 LOCATION
 ATTN:

KIN-BUC LANDFILL
 EDISON, NEW JERSEY
 CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
 DISCHARGE MONITORING REPORT

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01	01	01		01	01	31

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PCB-1260	SAMPLE MEASUREMENT	<0.000027	<0.000030	kg/day	*****	<0.3	<0.3	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab
ARSENIC	SAMPLE MEASUREMENT	<0.00090	<0.00103	kg/day	*****	<10	<10	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.013	0.026		*****	85.8	172			weekly	comp
CADMIUM	SAMPLE MEASUREMENT	<0.00045	<0.00051	kg/day	*****	<5.0	<5.0	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.0073	0.017		*****	48.2	112			weekly	comp
CHROMIUM	SAMPLE MEASUREMENT	<0.00090	<0.00103	kg/day	*****	<10	<10	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.030	0.060		*****	198	396			weekly	comp
COPPER	SAMPLE MEASUREMENT	<0.00018	<0.00020	kg/day	*****	<2	<2	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	10			weekly	comp
LEAD	SAMPLE MEASUREMENT	<0.00045	<0.00051	kg/day	*****	<5	<5	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	10			weekly	comp
NICKEL	SAMPLE MEASUREMENT	<0.0036	<0.0041	kg/day	*****	<40	<40	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.140	0.281		*****	824	1850			weekly	comp
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)					TELEPHONE		DATE		
Dennis J. Duryea, P.E. Area Manager							732 572-4743		01 02 21		
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COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS		(REFERENCE ALL ATTACHMENTS HERE)									

PERMITTEE NAME/ADDRESS

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ADDRESS

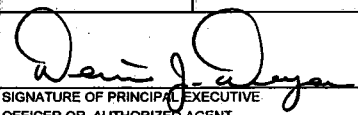
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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC	SAMPLE MEASUREMENT	0.0027	0.0066	kg/day	*****	29.6	68.0	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.177	0.356		*****	1170	2350			weekly	comp
CYANIDE	SAMPLE MEASUREMENT	<0.0009	<0.0010	kg/day	*****	<10	<10	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.002	0.004		*****	13.2	26.4			weekly	comp
ALUMINUM	SAMPLE MEASUREMENT	0.00096	0.0115	kg/day	*****	107	134	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	1.40	2.81		*****	9240	18500			weekly	comp
IRON	SAMPLE MEASUREMENT	<0.0090	<0.0103	kg/day	*****	<100	<100	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	80.6	162		*****	532000	1070000			weekly	comp
ACUTE TOXICITY, (LC50)	SAMPLE MEASUREMENT			***	*****	*****	*****	%			
	PERMIT REQUIREMENT	*****	*****		50(3)	*****	*****			see permit	equivalent
Ammonia (as N)	SAMPLE MEASUREMENT			***	*****	0.053	0.059	mg/l		2/Month	comp
	PERMIT REQUIREMENT				*****	4.9	10			2/month	comp
	SAMPLE MEASUREMENT			***	*****	*****	*****			*****	*****
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****			*****	*****
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
Dennis J. Duryea, P.E. Area Manager								732 572-4743		01 02 21	
TYPED OR PRINTED		AREA CODE		NUMBER		YEAR		MO		DAY	
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS		(REFERENCE ALL ATTACHMENTS HERE)									